

Ohio Legislative Service Commission

Office of Research and Drafting

Legislative Budget Office

H.B. 176 134th General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsors: Reps. Carfagna and Hall

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SUMMARY

• Makes changes to the law governing the practice of athletic training, including by requiring an athletic trainer to practice under a collaboration agreement with a physician or podiatrist.

DETAILED ANALYSIS

Practice of athletic training

According to the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board, athletic training is a health care profession specializing in returning individuals to physically active lifestyles.¹ To practice the profession in Ohio, an individual must hold an athletic trainer's license issued by the Board and be employed by an educational institution, professional or amateur organization, athletic facility, or health care facility.² Moreover, an athletic trainer may practice only on the referral of a physician, podiatrist, dentist, physical therapist, or chiropractor. H.B. 176 makes several changes to the law governing the profession, including by requiring physician or podiatrist collaboration and authorizing an athletic trainer to perform additional activities or services.³

¹ See State of Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board, Athletic Trainers – Consumer Education, available at https://otptat.ohio.gov/Portals/0/Pdfs/AT Consumer Education Jan2010.pdf?ver=2010-01-15-102930-897.

² R.C. 4755.60(B).

N.C. 4733.00(b).

Physician or podiatrist collaboration

Under the bill, in order to engage in the practice of athletic training, an athletic trainer must enter into a collaboration agreement with one or more physicians or podiatrists.⁴ The agreement must address the following topics:

- The duties and responsibilities to be fulfilled by the athletic trainer when engaging in the practice of athletic training;
- Any limitations on the athletic trainer's practice of athletic training;
- A plan of care for patients treated by the athletic trainer.⁵

The agreement must be in writing and signed by the athletic trainer and each physician or podiatrist with whom the athletic trainer collaborates. The trainer and each collaborating physician or podiatrist must maintain a copy of the agreement in his or her records.

An athletic trainer who fails to practice under a collaboration agreement may be subject to Board discipline, which may include a fine, reprimand, or license suspension or revocation.⁶

Note on referrals

While the bill preserves an existing law provision requiring an athletic trainer to practice on the referral of a physician, podiatrist, dentist, physical therapist, or chiropractor, it also allows for referrals from the following practitioners – physician assistants, nurse practitioners, and other athletic trainers. However, in the case of a referral from another athletic trainer, the bill specifies that the athletic trainer may practice on that referral only if the athletic training has already been recommended and referred by a health care professional other than an athletic trainer.

Scope of practice

With respect to the activities and services that an athletic trainer is permitted to perform under current law, the bill revises some of these as well as authorizes new ones.⁸ The following table illustrates the bill's changes and additions to the athletic training scope of practice.

⁵ R.C. 4755.621(C).

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⁴ R.C. 4755.621.

⁶ R.C. 4755.64, not in the bill.

⁷ R.C. 4755.60(A) and 4755.621(B).

⁸ R.C. 4755.60(A).

Existing law activities and services	H.B. 176 activities and services
Prevention, recognition, and assessment of an athletic injury	Prevention, examination, and athletic training diagnosis of injuries or conditions resulting from physical activities that require physical skill and utilize strength, power, endurance, speed, flexibility, range of motion, or agility
Complete management, treatment, disposition, and reconditioning of acute athletic injuries	Same, but refers instead to injuries or conditions resulting from physical activities
No provision	Provision of emergent care, therapeutic interventions, and rehabilitation for injuries or conditions resulting from physical activities
No provision	Promotion of and education about wellness
Administration of <i>topical drugs</i> that have been prescribed by a licensed health professional authorized to prescribe drugs	Instead refers to <i>drugs</i> that have been prescribed by a prescriber and are administered under the prescriber's direction
Organization and administration of educational programs and athletic facilities	Same, but references athletic training facilities
No provision	Performance of athletic training research
Education of and consulting with the public as it pertains to athletic training	Same

Since the bill replaces the terms athletic injuries and acute athletic injuries with the phrase injuries or conditions resulting from physical activities, it eliminates the existing law definition of "athletic injury." ⁹

Athletic training diagnosis

Because H.B. 176 authorizes an athletic trainer to make an athletic training diagnosis, the bill includes a definition for the term. It provides that an "athletic training diagnosis" means the judgment made after examining, evaluating, assessing, or interpreting symptoms presented by a patient to establish the cause and nature of the patient's injury, condition, or functional impairment and the plan of care for that injury, condition, or impairment within the scope of

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⁹ R.C. 4755.60(D).

athletic training. The bill further specifies that an athletic training diagnosis does not include a medical diagnosis. 10

Employers

In order to practice as an athletic trainer, current law requires the trainer to be employed by an educational institution, professional or amateur organization, athletic facility, or health care facility.¹¹ The bill eliminates this restriction.

License qualifications

The bill clarifies that a license to practice as an athletic trainer does not entitle its holder to provide, offer to provide, or represent that he or she is qualified to provide care or services for which he or she lacks the education, training, or experience to provide or is prohibited by law from providing.¹²

HISTORY

Action	Date
Introduced	03-04-21

H0176-I-134/ec

¹⁰ R.C. 4755.60(C).

¹¹ R.C. 4755.60(B).

¹² R.C. 4755.62(E).